N16379

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
. (Document Number)		
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SECRETARY OF SALIONS

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AUG 0 & 2017 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations South Bridge Park Condominium Assoc., Inc., No. 3 Name of Corporation N16379 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sharon S. Vander Wulp, Esq. Name of Contact Person Sharon S. Vander Wulp, P.A. Firm/Company 712 Shamrock Blvd. Venice, FL 34293

City/State and Zip Code jackie@keys-caldwell.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jackie Wood Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314



July 25, 2017

SHARON S. VANDER WULP SHARON S. VANDER WULP, P.A. 712 SHAMROCK BLVD VENICE, FL 34293

SUBJECT: SOUTH BRIDGE PARK CONDOMINIUM ASSOCIATION, INC., NO.

3

Ref. Number: N16379

We have received your document for SOUTH BRIDGE PARK CONDOMINIUM ASSOCIATION, INC., NO. 3 and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to our records Thomas Whittaker is not the registered agent for this corporation. See the attached print out.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 617A00014972

Diane Cushing Senior Section Administrator

www.sunbiz.org

Division of Companyions D.O. DOV 6227 Wallahargan Florida 3231

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.050 statement of change is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Florida
in order to change its registered office or regis	tered agent, or both, in the State of Florida.
1. The name of the corporation: South Bridge Par	rk Condominium Assoc., Inc., No. 3
2. The principal office address: 1525 Tamiami Tr	all 3., Offic 003, Vertice, 7 L 34203
3. The mailing address (if different):	
4. Date of incorporation/qualification: 08/15/1986	Document number: N16379
The name and street address of the current registered Florida Department of State: (If resigned, enter resign	agent and registered office on file with the ned)
Bruce H. Codville	
1525 S. Tamiami Trail, #60	3
Venice, FL 34285	
6. The name and street address of the new registered ag(if changed):	
Thomas Whittaker	((
1525 S. Tamiami Trail, #603	
Venice, FL 34285	OT acceptable
as changed will be identical.	et address of the business office of its registered agent,
Such change was authorized by resolution duly adopte authorized by the board, or the corporation has been n	ed by its board of directors or by an officer so otified in writing of the change.
Signature of an officer or director	Thomas Whittaker, director
I hereby accept the appointment as registered agent a I further agree to comply with the provisions of all stoperformance of my duties, and I am familiar with and agent. Or, if this document is being filed merely to rehereby confirm that the corporation has been notified	annes relative to the proper and complete accept the obligation of my position as registered effect a change in the registered office address, I
Signature of Registered Agent	8-1-17
If signing on behalf of an entity:	
South Bridge Park Condominium Assoc., Inc., No. 3	
Typed or Printed Name	

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *